# Awarding Care Ltd

## Inspection report

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## Ratings

### Overall rating for this service

| Good |

| Is the service safe? | Good |
| Is the service effective? | Good |
| Is the service caring? | Good |
| Is the service responsive? | Good |
| Is the service well-led? | Good |
Summary of findings

Overall summary

The inspection took place on 17 March 2017 and was announced.

The service is registered to provide care and support to people in their own homes. At the time of the inspection, the service was providing care and support to 130 people.

A registered manager was in post when we inspected the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are ‘registered persons’. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

People were happy with the support they received and felt safe with the staff supporting them. People knew the staff and felt comfortable with staff supporting them in their home. Staff understood how to protect people from harm and had undertaken training. The registered manager understood their obligations and was in contact with the local authority to discuss any concerns. Staff understood the risks to people’s health that people lived with and how to keep people safe. The registered manager included background checks of potential staff to understand whether they were suitable to work at the service. People’s support with medicines was reviewed by the registered manager to assure themselves that received the support they needed.

Staff had access to regular training and support and this helped staff better support people. Staff understood the importance of obtaining a person’s consent. The registered manager understood the requirements of the law and what action to take if they became concerned about a person’s ability to make decisions for themselves. People were supported to make choices in the meals and drinks staff prepared for them. Staff understood people’s dietary needs and how to support people to have healthy choices. People were supported to access additional medical help when this was required.

People liked the staff supporting them and felt at ease around them. People felt staff understood their needs and understood how to support them. Staff checked people were happy with the care and support they received and treated people with dignity and respect.

People’s care was reviewed and updated based on changing needs and circumstances. People were supported to express how they needed help and supported to provide feedback on the care.

The registered manager had systems in place for understanding people’s care needs. Regular review meetings with staff were all part of his system for monitoring and reviewing the quality of care people received. Staff described a positive and open environment to work within where they were able to access support and feedback on their performance.
The five questions we ask about services and what we found

We always ask the following five questions of services.

**Is the service safe?**

The service was safe.

People felt safe around staff that received training and understood how to keep people safe. Staff understood the risks that some people lived with how to keep them safe and take action to support their wellbeing. Staffing levels were continually monitored and recruitment processes included background checks on potential staff. The registered manager made regular checks to ensure people received their medicines correctly.

**Is the service effective?**

The service was effective.

People were cared for by staff who were supported through regular supervision and training. People were offered choices in the support and meals staff offered them. Staff supported people to access additional help from healthcare professionals.

**Is the service caring?**

The service was caring.

People were cared for by staff they liked and were familiar with. People were treated with kindness, dignity and respect by staff who understood how to support people.

**Is the service responsive?**

The service was responsive.

People were involved in making decisions about their care. People’s care was reviewed to ensure it was appropriate to meet people’s needs. People understood the complaints procedure should they need to raise a concern or complaint.

**Is the service well-led?**

The service was well led.

People’s care was regularly reviewed and updated by the
registered manager and changes to their care were communicated to staff. Staff liked the registered manager and felt able to access support and guidance. The registered manager had systems in place to assure themselves of the quality of care being delivered.
Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 17 March 2017 and was announced. The registered provider was given 48 hours’ notice because the location provides a domiciliary care service and we needed to be sure that someone would be available to see us. The inspection was carried out by one inspector.

The provider had completed a Provider Information Return (PIR). This form asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information we held about the service and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law.

As part of the inspection we spoke to eight people who received support from the service and three relatives. We also spoke with four staff, a care co-ordinator, a director of the business and the Registered Manager.

We reviewed eight care records, the complaints folder, recruitments processes as well as monthly checks the registered manager completed.
Is the service safe?

Our findings

Staff described how they protected people from harm and about their understanding of safeguarding and keeping people safe. They told us they had received training and that this had given them confidence to keep people safe. One staff member told us, "I’ve never seen anything bad but I would speak to the manager if I was worried about someone." Notifications we reviewed as part of the inspection confirmed that the registered manager understood their obligations with respect to keeping people safe. The registered manager also told us they would consult the local authority if they were unsure of anything.

Staff we spoke with understood people’s individual health needs and how people required support to maintain their wellbeing and keep them safe. Staff we spoke with understood what action to take if they became concerned about a person’s skin breaking down. One staff member told us, "I’d call the office to let them know and call the district nurse." Staff told us information was available to them in care plans which detailed how to support people. Care plans we reviewed contained up to date information about people’s health needs. Staff we spoke with told us they read the care plans to understand how to best support people.

The registered manager told us the business had gone through a period of expansion and that they continually monitored people’s care needs to ensure people received the care they needed with the appropriate staffing level. The registered manager told us they did not take on packages of care unless they were certain they had the staff needed. A computerised system was used to plan people’s calls so that the registered manager knew if staff were late or had not arrived on a call. They told us they could then take action to ensure the person received the care they needed.

We reviewed how incidents were reported. We saw that there was a process in place for staff to record incidents and share the details with the registered manager. The registered manager told us they analysed the incidents and this allowed them to understand whether a person’s care needed to be adjusted or whether staff had a particular training need. For example, if there were missed medications, this may suggest a staff member needed training with medications.

The registered manager completed DBS checks (Disclosure and Barring Service) for prospective staff. The DBS is a national service that keeps records of criminal convictions. This information supported the registered provider to ensure suitable people were employed, so that the risk of recruiting inappropriate staff was minimised. We reviewed the process for monitoring recruitment processes and saw that there was a system in place to ensure checks were completed on the suitability of staff before they commenced work.

People we spoke with were positive about the support they received. One person told us about the staff, "They watch to make sure you’ve taken your tablets." Staff we spoke with confirmed they received training to support people with their medication. We saw staff were monitored to ensure they completed documentation relating to medicines correctly. These checks were made on a regular basis and were the results were shared with the registered manager. Where issues had been identified, staff were offered further training.
Our findings

People told us they were confident around the staff that supported them. One person told us, "They're ever so good. All of them." People felt reassured that staff knew how they needed support.

Staff told us about the training they received and how this had helped them to support people. One staff member told us "The training is very good." Staff described training positively and told us they were encouraged to access training. The registered manager ensured staff had access to training and support by monitoring how many staff required training. The registered manager told us they came from a training background and felt passionate about staff having the correct training. We saw on the noticeboard in the administration office information about training opportunities available to staff.

Staff were able to describe to us the importance of obtaining someone's consent when supporting them. Staff told us they would speak to a member of their administration office for guidance if they were unsure of anything. We saw from people care records that the registered manager considered whether people had the capacity to make decisions for themselves in their assessment of people.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. Staff could explain to us what was meant by a Best Interest decision and demonstrated this knowledge by sharing examples. Staff told us they had recently received training about the subject and felt confident to share their knowledge.

Where people receive support in their own home, applications to deprive a person of their liberty must be made to the Court of Protection. We checked whether the service was working within the principles of the MCA. The Registered Manager understood the process for referring matters to the Court of Protection if they needed to. The Registered Manager did not currently support anyone that had been referred to the Court of Protection at the time of our inspection.

People told us staff always asked them about the meals and drinks they should prepare for people. One person told us they ate very similar food everyday but that staff always asked them what to prepare. Another person told us they had the same breakfast every day and staff knew and understood this. Staff knew about people's dietary needs and how this related to each person. For example, they could tell us which people lived with diabetes and the support they offered to each individual person.

People were able to access support from services such as the GP, optician and dentist. One person told us they had not felt well that day and they were awaiting a visit from the GP after staff called the doctor. Staff
told us they had a good relationship with local healthcare professionals and understood to call out the GP or district nurse if they required more specialised advice.
Is the service caring?

Our findings

People spoke positively about the staff that supported them. People told us they knew their regular staff and got to know them. One person told us, "They’re all pleasant." Another person told us, "They’re friendly and you can have a chat." People told us they had access to staff they were familiar with and who they knew and saw regularly and felt comfortable around them.

People we spoke with told us staff usually asked them if they were people were happy with the support they received. One person told us, "I always ask them to do things and they never say no." People told us staff always checked that they were happy with before they left or if there was anything else they could do. Staff we spoke with also told us that they always asked people if there was anything they needed doing before they left. One staff member told us this helped them check that the person was happy with everything.

Staff talked knowledgeably about the people they supported. One staff member told us about one of the people supported preferred nice crockery for their meals whilst another liked their bed sheets pulled really tightly on the bed so they looked neat. A number of staff had cared for people previously when the service was owned by another company. Where this was the case, the registered manager had tried to ensure people kept the same staff member. One staff member told us, "I’ve known some of my service users for ages." They told us this helped them care and support people. Where staff were not familiar with people’s needs they shadowed other staff to better understand them. One person told us about staff, "Once they've been a couple of times they know what to do."

People told us staff treated them with dignity and respect. One person told us about staff, "They’re very gentle." People we spoke with told us staff respected them and their things. They told us staff always put things back where they were supposed to go. One person told us staff never left things out and if they saw something needed doing would instinctively complete the task.

Staff we spoke with understood what it meant to support people so that people were treated with dignity and respect. Staff gave practical examples of maintaining a person’s dignity by ensuring the person had access to privacy and space when receiving personal care. Staff told us they received training on the subject. One staff member told us they had supported their family member when they required care support and this gave them insight into the person’s experience.

People using the service were supported to maintain friendships and relationships that were of importance to them. People were supported to attend a luncheon club to reduce their risk of loneliness. The registered manager told us they had helped support people to attend a Christmas meal with other people who used their service. They told us it was important to support the person so that people did not feel isolated. They helped to arrange this with other organisations in the local area.
Is the service responsive?

Our findings

People's support needs were discussed during their care planning process. People told us that before they commenced care, they met with the registered manager and discussed all their care requirements. The registered manager told us they met with people at the assessment stage and tried to obtain as much information about the person so that they could best support people. For example, they wanted to understand whether they preferred a same sex staff member or the tasks the person needed help with.

People told us about how contributing to the care planning process was important to them in order that they received the care they needed. One person told us they didn’t like the time of their call but that they had spoken with the administration office and their call time was now closer to the time they needed. People we spoke with told us staff helped and supported with things that were important to them. One person told us they felt pleased to see staff and they looked forward to "sitting down with a cup of tea" with staff. Another person told us they liked things done in a particular way and that staff always folded their towels how they had asked them to. Another person told us they did not like hot drinks and that staff always prepared their favourite juice for them.

Staff knew the people they supported well and understood their care needs. Staff we spoke with told us about some of the people they had supported and how their care was adjusted in line with their needs. One staff member told us about how they had supported one person had not required very much support initially, but that their health had deteriorated and required more help. Another staff member told us people had reviews periodically to ensure their care needs were being met.

We reviewed four care plans which contained information staff could refer to when supporting people. The registered manager had undertaken a review of care plans and had changed the way information was contained within care plans to make it easier for staff to refer to, after some staff feedback the difficulty they had using the old care plans. Staff told us the new plans were much easier to follow and made it quicker to access the information they needed.

People we spoke with understood they could complain if they wanted to or speak with the registered manager. One person told us they had complained and that they had asked for the same staff as they had experienced a number of staff. They told us once they highlighted the problem, the administration team worked with them to resolve the issue. We saw that the registered manager had a complaints process in place and that there was a system in place for acknowledging and responding to complaints.
Is the service well-led?

Our findings

The registered manager was also the registered provider of the service and told us this helped him to be passionate about the service delivered. People we spoke with understood they could speak to someone in the administration office about any issue they had and felt able to contact and speak with the registered provider if necessary.

Staff we spoke with all spoke warmly and positively about the registered manager. One staff member described him as "lovely". Whilst another staff member described him as "Really nice". Staff described the registered manager as open and easy to approach. One staff member told us they needed some personal advice from the registered manager and he had been helpful in the advice offered. Staff told us they felt well supported by the registered manager. They told us that they were given information that helped them support people and would not have any hesitation calling him to speak with him if necessary. One staff member told us they were given plenty of information about supporting people and that they received their rotas in plenty of time. Another staff member told us all of the office staff were willing to offer direction and support if they needed guidance and they could pop in and speak to the staff anytime.

Staff understood the Whistleblowing policy and what this meant for them. Staff we spoke with confirmed they had access to it and understood its contents. The registered manager, explained how on one occasion, they had been made aware of opinions staff were sharing that were not consistent with the policy in terms of respecting people’s human rights. As a consequence of this they arranged Equalities training for staff, for staff to under the importance of treating people fairly. They also, were appropriate took disciplinary action against staff involved.

The registered manager assured themselves of the quality of care delivered through a number of ways. We saw that the registered manager had a daily meeting with the office based staff to understand the issues that had come to prominence. He told us he did this to understand what was happening. We saw that the information regarding the cancellation of calls or new calls that were about to start, were discussed so that the correct information could be communicated to staff. Staff told us information was communicated to them through newsletters, meetings and through mobile phone messages. Staff told us they through the level of information they received was good and appropriate to the people they were supporting.

The registered manager undertook a number of spot checks on staff in order to understand the quality of care being delivered. One person told us, "A lady came out from the office to check everything was ok." We saw records of how each visit was recorded so that the registered manager could be alerted of any issues that required further attention. They told us they did this to assure themselves that they were happy with the care being delivered. We saw the daily care records for eight people and saw that they were detailed. The registered manager told us they had reviewed them and made clear how they expected daily care records to be completed.

The registered manager also sent out questionnaires to people who used the service. We saw that people had responded positively and indicated that they were happy with the service they were receiving. The
registered manager told us that many of the people using the service initially used the service on a short contract after being discharged from hospital and stayed on with the service. He told us this helped staff develop an understanding of people and their needs.